

PETER LOUIS HINES # 332 380  
 Name and Prisoner/Booking Number

RED ROCK CORRECTIONAL CENTER  
 Place of Confinement

1752 E ARICA RD  
 Mailing Address

ELOY AZ 85131  
 City, State, Zip Code

FILED  LODGED

Mar 17 2025

CLERK U.S. DISTRICT COURT  
 DISTRICT OF ARIZONA

(Failure to notify the Court of your change of address may result in dismissal of this action.)

IN THE UNITED STATES DISTRICT COURT  
 FOR THE DISTRICT OF ARIZONA

PETER LOUIS HINES ,

(Full Name of Plaintiff)

Plaintiff,

v.

(1) CORE CIVIC ,  
 (Full Name of Defendant)

(2) \_\_\_\_\_ ,

(3) \_\_\_\_\_ ,

(4) \_\_\_\_\_ ,

Defendant(s).

Check if there are additional Defendants and attach page I-A listing them.

CASE NO. CV-25-882-PHX-MTL (ASB)

(To be supplied by the Clerk)

CIVIL RIGHTS COMPLAINT  
 BY A PRISONER

JURY TRIAL DEMANDED

- Original Complaint  
 First Amended Complaint  
 Second Amended Complaint

A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:

- 28 U.S.C. § 1343(a); 42 U.S.C. § 1983  
 28 U.S.C. § 1331; *Bivens v. Six Unknown Federal Narcotics Agents*, 403 U.S. 388 (1971).  
 Other: \_\_\_\_\_

2. Institution/city where violation occurred: RED ROCK CORRECTIONAL CENTER / Eloy.

**B. DEFENDANTS**

1. Name of first Defendant: CORE CIVIC The first Defendant is employed  
as: SECURITY PROVIDER at RED ROCK CORRECTIONAL CENTER  
(Position and Title) (Institution)
2. Name of second Defendant: \_\_\_\_\_ The second Defendant is employed as:  
as: \_\_\_\_\_ at \_\_\_\_\_  
(Position and Title) (Institution)
3. Name of third Defendant: \_\_\_\_\_ The third Defendant is employed  
as: \_\_\_\_\_ at \_\_\_\_\_  
(Position and Title) (Institution)
4. Name of fourth Defendant: \_\_\_\_\_ The fourth Defendant is employed  
as: \_\_\_\_\_ at \_\_\_\_\_  
(Position and Title) (Institution)

If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.

**C. PREVIOUS LAWSUITS**

1. Have you filed any other lawsuits while you were a prisoner?  Yes  No
2. If yes, how many lawsuits have you filed? \_\_\_\_\_. Describe the previous lawsuits:
- a. First prior lawsuit:
1. Parties: \_\_\_\_\_ v. \_\_\_\_\_
  2. Court and case number: \_\_\_\_\_
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) \_\_\_\_\_
- b. Second prior lawsuit:
1. Parties: \_\_\_\_\_ v. \_\_\_\_\_
  2. Court and case number: \_\_\_\_\_
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) \_\_\_\_\_
- c. Third prior lawsuit:
1. Parties: \_\_\_\_\_ v. \_\_\_\_\_
  2. Court and case number: \_\_\_\_\_
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) \_\_\_\_\_

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

#### D. CAUSE OF ACTION

##### COUNT I

1. State the constitutional or other federal civil right that was violated: DUE PROCESS  
5TH AND 14TH AMENDMENT

2. Count I. Identify the issue involved. Check **only one**. State additional issues in separate counts.
- |  |   |   |                                       |
|--|---|---|---------------------------------------|
| <input type="checkbox"/> Basic necessities                   | <input type="checkbox"/> Mail             | <input type="checkbox"/> Access to the court  | <input type="checkbox"/> Medical care |
| <input checked="" type="checkbox"/> Disciplinary proceedings | <input type="checkbox"/> Property         | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Retaliation  |
| <input type="checkbox"/> Excessive force by an officer       | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: _____         |                                       |

3. Supporting Facts. State as briefly as possible the FACTS supporting Count I. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

A TARGETED CELL SEARCH WAS CONDUCTED ON MY CELL, MYSELF PRESUMABLY BEING THE INTENDED "TARGET". SGT DENSMORE PER HIS REPORT STATED THAT INMATE HIS (MYSELF) WAS FOUND IN POSSESSION AND IN USE OF A SMART PHONE. DENSMORE'S STATEMENTS HOWEVER ARE UNTRUE AND PRESUMABLY INTENTIONALLY MISLEADING. THIS IS A CLEAR VIOLATION OF DUE PROCESS AND THE 5TH AND 14TH AMENDMENTS TO THE U.S. CONSTITUTION. FALSE OR MISLEADING EVIDENCE CAN NOT BE USED TO OBTAIN A CONVICTION. THE TRUTH IS THAT THE PHONE WAS FOUND ON MY CELLMATE'S BUNK AND IT WASN'T "IN USE" BY ME AS STATED BY DENSMORE. FURTHER, MY CELLMATE ADMITTED THAT THE PHONE WAS HIS. HAD DENSMORE PROVIDED THE FACTS AS THEY ACTUALLY HAPPENED, AND GIVEN MY CELLMATE'S CONFESSION, ANY REASONABLE JURIST WOULD COME TO THE OBVIOUS CONCLUSION THAT I AM INDEED INNOCENT. THE EVIDENCE PRESENTED FAILS WELL BELOW THE 51% PREPONDERANCE OF THE EVIDENCE STANDARDS. AND ANY ARGUMENTS TOWARDS CONSTRUCTIVE POSSESSION FAIL WHERE MY CELLMATE WAS NEVER GIVEN A TICKET. INDEED THE COURTS HAVE HELD THAT IN CASES SUCH AS MINE WHERE GOOD TIME IS TAKEN AND A PRISON SENTENCE IS THEREFORE LENGTH-

SEE ATTACHMENT A

4. Injury. State how you were injured by the actions or inactions of the Defendant(s).

LOSS OF GOOD TIME, LOSS OF VISIT, PHONE CALLS, COMMISARY

5. Administrative Remedies:

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution?  Yes  No
- Did you submit a request for administrative relief on Count I?  Yes  No
- Did you appeal your request for relief on Count I to the highest level?  Yes  No
- If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. \_\_\_\_\_

**COUNT II**

1. State the constitutional or other federal civil right that was violated: \_\_\_\_\_

2. **Count II.** Identify the issue involved. Check **only one**. State additional issues in separate counts.

<input type="checkbox"/> Basic necessities	<input type="checkbox"/> Mail	<input type="checkbox"/> Access to the court	<input type="checkbox"/> Medical care
<input type="checkbox"/> Disciplinary proceedings	<input type="checkbox"/> Property	<input type="checkbox"/> Exercise of religion	<input type="checkbox"/> Retaliation
<input type="checkbox"/> Excessive force by an officer	<input type="checkbox"/> Threat to safety	<input type="checkbox"/> Other: _____	

3. **Supporting Facts.** State as briefly as possible the FACTS supporting Count II. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

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4. **Injury.** State how you were injured by the actions or inactions of the Defendant(s).

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5. **Administrative Remedies.**

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution?  Yes  No
- b. Did you submit a request for administrative relief on Count II?  Yes  No
- c. Did you appeal your request for relief on Count II to the highest level?  Yes  No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. \_\_\_\_\_

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COUNT III

1. State the constitutional or other federal civil right that was violated: \_\_\_\_\_.

2. **Count III.** Identify the issue involved. Check **only one**. State additional issues in separate counts.

Basic necessities       Mail       Access to the court       Medical care  
 Disciplinary proceedings       Property       Exercise of religion       Retaliation  
 Excessive force by an officer       Threat to safety       Other: \_\_\_\_\_

- 3. Supporting Facts.** State as briefly as possible the FACTS supporting Count III. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

4. **Injury.** State how you were injured by the actions or inactions of the Defendant(s).

\_\_\_\_\_  
\_\_\_\_\_

- ## 5. Administrative Remedies.

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution?  Yes  No

b. Did you submit a request for administrative relief on Count III?  Yes  No

c. Did you appeal your request for relief on Count III to the highest level?  Yes  No

d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not.

If you assert more than three Counts, answer the questions listed above for each additional Count on a separate page.

**E. REQUEST FOR RELIEF**

State the relief you are seeking:

COMPENSATORY DAMAGES  
PUNITIVE DAMAGES  
RESTORATION OF GOOD TIME  
ANY OTHER RELIEF THE COURT DEEMED JUST OR FIT.

I declare under penalty of perjury that the foregoing is true and correct.

Ex. Date 3-17-2025 \_\_\_\_\_  
DATE

  
\_\_\_\_\_  
SIGNATURE OF PLAINTIFF

(Name and title of paralegal, legal assistant, or  
other person who helped prepare this complaint)

(Signature of attorney, if any)

(Attorney's address & telephone number)

**ADDITIONAL PAGES**

All questions must be answered concisely in the proper space on the form. If you need more space, you may attach no more than fifteen additional pages. But the form must be completely filled in to the extent applicable. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages.

## ATTACHMENT A

ENDED, INCREASED CARE SHOULD BE GIVEN TO THE DISPOSITION OF THIS CASE. INDEED TO ALLOW SOMEONE TO BE GIVEN MORE TIME UNDER THE CIRCUMSTANCES OF MY CASE IS FUNDAMENTALLY UNFAIR AND CONSTITUTES A MERCARRIAGE OF JUSTICE.

WERE DEALING WITH A SITUATION WHERE TWO OFFICERS (PENSMORE AND TREVINO) RESPOND TO MY CELL FOR A TARGETED CELL SEARCH AND THE FACTS SURROUNDING THE SEARCH ARE MISSTATED OR EVEN FAUCIFIED AND OFFICER TREVINO HAS A HISTORY OF FALSE REPORTING, SOMETIMES SAYING PEOPLE ADMITTED GUILT WHEN THEY DID NOT, WHICH HAS LEAD TO NUMEROUS GRIEVANCES FILED AGAINST HIM AND EVEN CIVIL SUIT.

NOW IF YOU TAKE INTO CONSIDERATION THE FACT THAT MY CELLMATE MADE SWORN STATEMENTS TO THE DEPARTMENT HEARING OFFICER AND SUBMITTED A SWORN AFFIDAVIT (SEE ATTACHMENT B) CLEARLY ADMITTING TO OWNERSHIP OF THE PHONE AND THAT THE PHONE WAS FOUND ON HIS BUNK, ANY REASONABLE JUROR WOULD COME TO THE OBVIOUS DETERMINATION THAT I AM INDEED INNOCENT. FURTHER, DEPARTMENT ORDER STATES BOTH CELLMATES MUST BE PLACED ON REPORT IN THIS SITUATION AND YET ONLY I WAS PLACED ON REPORT VIOLATING DEPARTMENT POLICY AND RAISING EVEN GREATER SUSPICION AS TO THE LEGITIMACY OF THE CLAIM AGAINST ME.

INJURY IN THIS CASE CONSISTS OF BUT IS NOT LIM

ITEM TO, LOSS OF GOOD TIME WHICH MEANS ADDITIONAL  
TIME IN PRISON, LOSS OF VISITS, PHONE CALLS, COMMU-  
NICATION, MENTAL AND EMOTIONAL STRESS AND GRIEF AS  
WELL AS HUMILIATION.

RESPECTFULLY SUBMITTED THIS 17<sup>TH</sup> DAY OF MARCH 2025

BY Peter Hinck  
PETER HINCK IN PRO PER

Attachment B

AFFIDAVIT FROM

MARK GONZALEZ

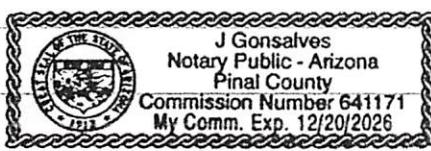
## Affidavit

This is the Affidavit of Mark Gonzalez #364752, I write this in my own hand under the penalty of perjury. No one has threatened me, promised me, or coerced me to write this.

Everything I write is true and correct.

- 1) On 8/11/24 my cell and bunk was searched, and my cellphone was found.
- 2) I took full responsibility right away and confessed this to Sgt. Densmore.
- 3) I also confessed in a witness statement, to the CO III and to the Captain, and now in this Affidavit that said Cellphone is mine and found in my area.
- 4) I take full responsibility for my phone and my actions.

I swear all this under the penalty of perjury, that all that is written is true and correct.



Gonsalves  
10-2-24

Sincerely  
Mark Gonzalez #364752  
10/2/24